PART B - FEE(S) TRANSMITTAL

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APPLICATION NO. FILING DA		FILING DATE	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/550,551 09/26/2005			Alain BEHAR		Q90507		1903			
TITLE OF INVENTIO	N: FLUID P	RODUCT DISPEN	SER							
APPLN. TYPE	SMALI ENTITY			PUBLICATION FEE		PAID ISSUE FEE TOTAL FEE DUE		(S) DATE DUE		
nonprovisional	onprovisional NO \$1510.00		0.00	\$300.00		\$0.00	\$1,810.00		09/02/2009	
EXAMINER			ART UNIT CLAS		S-SUBCLASS					
R	obert K. NICI	HOLS II		3754	22	22-135000				
1. Change of correspon	dence address	or indication of "Fe	e Address" (3	7 CFR 1.363	2. For printing of	on the patent front p	nage list 1	Sughru	e Mion, PLLC	
☐ Change of correspondence address (or Change of Correspondence Addres PTO/SB/122) attached.				Address form		of up to 3 regis nts OR, alternative				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB 03-02 or more recent) ATTACHED. Use of a Customer Number is requir					(2) the name of a single firm (having as a member a registered attorney or agent) and the 3 names of up to 2 registered pattent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME	AND RESID	ENCE DATA TO B	E PRINTED	ON THE PAT		ne)				
PLEASE NOTE: Unle							entified below, the	documer	nt has been filed for	
recordation as set forth (A) NAME OF ASSIG) RESIDENCE: (CI				gnment.				
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Please check the appro	priate assigne	e category or catego	ries (will not	be printed on t	he patent): 🗆 Ind	ividual 🗹 Corporat	ion or other private	group en	itity 🗆 Governmen	
4a. The following fee(s) are submitted:				4b. Paymer	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)					
☑ Issue Fee			☐ A check	☐ A check is enclosed.						
☑ Publication Fee (No small entity discount permitted)				☐ Paymen	☐ Payment by credit card. Form I310-2038 is attached.					
☐ Advance Order - # of Copies					☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880.					
						and authorized to c any overpayments t			eposit Account No	
Change in Entity Sta		,								
a. Applicant claims						claiming SMALL I				
The Director of the US		11.			**					
NOTE: The Issue Fee party in interest as sho						he applicant; a regis	stered attorney or a	gent; or ti	he assignee or other	
And other Life and		Raja S	alilen		Date		August 26	, 2009		
Authorized Signature										
Authorized Signature							43,078			